FORM D

U.S. SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

OMB APPROVAL OMB NUMBER: 3235-0076

Expires: April 30, 2008 Estimated average burden hours per response . . 16.00

FLEWFED

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY Prefix Serial DATE RECEIVED								
Prefix		Serial	_					
DA	TE R	ECEIVED						
	1	1						

Name of Offering (check if this is an amendment and name has changed, and indicate change.) SCOGGIN CREDIT OPPORTUNITIES FUND LLC	Mar
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6)	Section
A. BASIC IDENTIFICATION DATA	. SELIUSI
Enter the information requested about the issuer	DD 15 2008
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	16K-10-5000
SCOGGIN CREDIT OPPORTUNITIES FUND LLC	Vashington, DC
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
660 Madison Avenue, 20 th Floor, New York, New York 10065	(212) 355-5600
Address of Principal Business Operations (if different from Executive Offices) (Number and Street, City, State, Zip Code) (PROCESSED)	Telephone Number (Including Area Code)
Brief Description of Business securities investment APR 2 1.2008	
Type of Business Organization corporation	
Month Year Actual or Estimated Date of Incorporation or Organization: [0 3] [0 6] Actual Actual	Estimated
Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: (Enter two-letter U.S. Postal Service abbreviation for State: (D][E] (CN for Canada; FN for other foreign jurisdiction)	

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the

Filing Fee: There is no federal filing fee.

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

		A. BASIC IDEN	TIFICATION DATA		
2. Enter the informatio	n requested for the fol	llowing:			
	ter of the issuer, if the	issuer has been organized with	in the past five years:		
Each benefic	cial owner having the	power to vote or dispose, or dir	ect the vote or disposition of, 109	% or more of a class of e	quity securities of the issuer;
Each execut	ive officer and directo	or of corporate issuers and of co	rporate general and managing par	tners of partnership issu	ers; and
Each genera	l and managing partne	er of partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	Managing Member
Full Name (Last name first, if it	ndividual)				
Old Bellows Advisors LI	.c				
Business or Residence Address	(Number and Street,	City, State, Zip Code)			
660 Madison Avenue, 20	th Floor, New Yor	rk, New York 10065			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Principal	Director	General and/or Managing Partner
Full Name (Last name first, if it	ndividual)				
Chodry, Dev					
	•				
	th Floor, New Yor				
Check Box(es) that Apply:	Promoter	Beneficial Owner	Principal	☐ Director	General and/or Managing Partner
Full Name (Last name first, if in	ndividual)				
Effron, Craig					
Business or Residence Address	(Number and Street,	City, State, Zip Code)			
660 Madison Avenue, 20	th Floor, New Yor	k, New York 10065			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Principal	Director	General and/or Managing Partner
Full Name (Last name first, if in	ndividual)	-			
Schenker, Curtis					
Business or Residence Address	(Number and Street,	City, State, Zip Code)			
660 Madison Avenue, 20	th Floor, New Yor	k, New York 10065			
Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply:					
Full Name (Last name first, if in	ndividual)			·	
Business or Residence Address	(Number and Street,	City, State, Zip Code)			· · · ·
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	
Full Name (Last name first, if in	ndividual)				
Business or Residence Address	(Number and Street	City, State, Zin Code)			
	and buckly	, от			
	(Use b	plank sheet, or copy and use add	litional copies of this sheet, as neo	cessary.)	

					B. II	NFORM.	ATION	ABOUT	OFFER	ING				
1.	Has the	issuer sold	, or does the	issuer inte	nd to sell, t	o non-accre	dited inves	stors in this	offering?					Yes No
								lumn 2, if f						
2.	What is	the minim	um investme	ent that wil	l be accepte	d from any	individual'	?					************	*\$ <u>5,000,000</u>
					ay be waive									
3.	Does the	e offering r	ermit joint	ownership	of a single t	ınit?								Yes No
4.	Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. None Full Name (Last name first, if individual)													eration for ter or ssociated
Full Nam	ie (Last na	me first, if	individual)											
Business	or Reside	nce Addres	s (Number a	and Street,	City, State,	Zip Code)					<u> </u>			
Name of	Associate	d Broker of	r Dealer				···	 -	· · · · · ·					
States in	Which Par	reon Lietad	Has Solicite	ad or Inten	de to Solicit	Purchasers								
														All States
(Cneck	[AL] [IL] [MT] [RI]	[AK] [IN] [NE] [SC]	individual ([AZ] [IA] [NV] [SD]	(AR) [AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] (MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	All States
Full Nam	e (Last na	me first, if	individual)									·		
Business	or Dacida	nca Addres	s (Number a	and Street	City State	7in Code)								
Dustitess	or Reside	nec Addres	s (rumber a	ind Street,	City, State,	Zip Code)								
Name of	Associate	d Broker or	Dealer											
States in	Which Per	rson Listed	Has Solicite	ed or Intend	ls to Solicit	Purchasers					•			
(Check	"All State: [AL] [IL] [MT] [RI]	s" or check [AK] [IN] [NE] [SC]	individual ([AZ] [IA] [NV] [SD]	States) [AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	[CT] [ME] [NY] [VT]	[DE] [MD] [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	[HI] [MS] [OR] [WY]	[ID] [MO] [PA] [PR]	All States
Full Nam			individual)	((· · · · · · · · · · · · · · · · · · ·							
Queinose	or Docida	noa Addros	s (Number a	and Ctreat	City State	Zin Codo)								
Dusiness	or Reside	nce Addres	s (Number :	ina Street,	City, State,	Zip Code)								
Name of	Associate	d Broker or	Dealer											
States in	Which Per	rson Listed	Has Solicite	ed or Intend	ls to Solicit	Purchasers								
(Check	"All States [AL] [IL] [MT] [RI]	s" or check [AK] [IN] [NE] [SC]	individual S [AZ] [IA] [NV] [SD]	States) [AR] [KS] [NH] [TN]	[CA] [KY] [NJ] [TX]	[CO] [LA] [NM] [UT]	(CT) [ME] [NY] [VT]	[DE] {MD} [NC] [VA]	[DC] [MA] [ND] [WA]	[FL] [MI] [OH] [WV]	[GA] [MN] [OK] [WI]	(HI] [MS] [OR] [WY]	(ID) (MO) (PA) (PR)	All States

TN] [TX] [UT] [VT] [VA] [WA] [WV] [W] (Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND US	E OF PROCEED	S
1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box \(\square\$ and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$	\$
	☐ Common ☐ Preferred	,	
	Convertible Securities (including warrants)	\$	\$
	Partnership Interests	\$	\$
	Limited Liability Company Interests	\$ 500,000,000	\$82,500,000
	Total	*\$500,000,000	\$82,500,000
	Answer also in Appendix, Column 3, if filing under ULOE.		·
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amount of Purchases
	Accredited Investors	11	\$82,500,000
	Non-accredited Investors	N/A	\$ <u>N/A</u>
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C – Question 1.	Tuna of	Dellas Assaura
	Type of offering	Type of Security	Dollar Amount Sold
	Rule 505	2222,	\$
	Regulation A		\$
	Rule 504		\$
	Total		\$
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$ <u>0</u>
	Printing and Engraving Costs		\$ <u>0</u>
	Legal Fees		\$ <u>45,000</u>
	Accounting Fees	⊠	\$ <u>0</u>
	Engineering Fees		\$ <u>0</u>
	Sales Commissions (specify finders' fees separately)		\$ <u>0</u>
	Other Expenses (identify) Miscellaneous (blue sky fees, duplicating, courier, etc.)		\$10,000
	Total		\$55,000
	* This is a continuous offering. Therefore, the aggregate offering price could be greater that	n or less than this a	mount

_	C. OFFERING PRICE, NUMBER OF I		F PROCEEDS	
	b. Enter the difference between the aggregate offerir Question 1 and total expenses furnished in response t is the "adjusted gross proceeds to the issuer."	to Part C - Question 4.a. This difference		*\$499 <u>,</u> 945 <u>,</u> 000
5.	Indicate below the amount of the adjusted gross procedused for each of the purposes shown. If the amount an estimate and check the box to the left of the estimate equal the adjusted gross proceeds to the issuer states 4.b above.	nt for any purpose is not known, furnish ate. The total of the payments listed		
			Payments to Officers, Directors, & Affiliates	Payments To Others
	Salaries and fees	.,,,,,,,	□\$	□\$
	Purchase of real estate		\$	□ \$
	Purchase, rental or leasing and installation of machin	ery and equipment	□\$	
	Construction or leasing of plant buildings and faciliti	ies	□ \$	
	Acquisition of other businesses (including the value			
	that may be used in exchange for the assets or securit		□\$	□\$
	merger) Repayment of indebtedness		□ \$	□ \$ □ \$
	Working capital		□ \$	□\$
	Other (specify): to be used as described in Issuer's C		□ \$	□ \$ <u></u> ■ \$499,945,000
	Memorandum		□ Ф	<u>νν</u> φ <u>422,243,000</u>
	Column Totals		□\$	\$499,945,000
	Total Payments Listed (column totals added)		*\$ <u>4</u>	99,945,000
	D. FE	DERAL SIGNATURE	<u> </u>	
	suer has duly caused this notice to be signed by the u	indersigned duly authorized person. If the		
	ring signature constitutes an undertaking by the issuer to staff, the information furnished by the issuer to any non-			
Issuer (Print or Type) S	ignature	Date	·
	GGIN CREDIT OPPORTUNITIES FUND LLC	A. DwChody	B	10,2008
Name o	f Signer (Print or Type)	itle of Signer (Print or Type)	•	
Dev C	Chodry P	Principal of Old Bellows Advisors LLC, M	lanaging Membe	r of Issuer
	* See as	sterisked comment on p.4.		

ATTENTION
Intentional misstatements or omissions of act constitute federal criminal violations. (See 18 U.S.C. 1001.)

1.	Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?									
	See Append	lix, Column 5, for state response.								
2.	The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.									
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.									
4.	The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform Limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.									
	uer has read this notification and knows the contents gned duly authorized person.	s to be true and has duly caused this notice to be si	gned on its behalf by the							
Issuer (Print or Type)	Signature	Date							
SCOG	GIN CREDIT OPPORTUNITIES FUND LLC	A. DWWord 10, 2008								
Name (Print or Type)	Title (Print or Type)								
Dev Ch	odry	Principal of Old Bellows Advisors LLC, Managing Member of Issuer								

E. STATE SIGNATURE

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 2 3 Disqualification under State ULOE Intend to sell Type of security to non-accredited (if yes, attach explanation of investors in State and aggregate offering price offered in State (Part B-Item 1) Type of investor and waiver granted) amount purchased in State (Part E-Item 1) (Part C-Item 2) (Part C-Item 1) Limited Number of Number of **Liability Company** Accredited Non-Accredited Interests Investors Yes No State Yes No Investors Amount Amount ALΑK AZAR CACO CTDE DC FL \mathbf{X} X 1 5,000,000 0 X $\mathsf{G}\mathsf{A}$ \mathbf{X} \mathbf{X} Ì 2,000,000 0 X HI ID X X 40,000,000 0 X IL1 IN IΑ KS KY LA ME MD MA MI MN MSMO MTNE NV NH NJ X \mathbf{X} 2 15,000,000 0 \mathbf{X}

NM

	 			AP	PENDIX					
. 1	Intend to non-ac investors (Part B-	to sell credited in State	3 Type of security and aggregate offering price offered in State (Part C-Item 1)	4 Type of investor and amount purchased in State (Part C-Item 2)					5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Limited Number of Number of Liability Company Accredited Non-Accredited				Amount	Yes	No			
NY		X	x	6	20,500,000	0			X	
NC										
ND				-						
ОН										
OK										
OR										
PA										
RI										
SC					. '					
SD										
TN										
TX										
UT										
VT										
VA										
WA										
WV										
WI										
WY										
PR										

